



DECLARATION FOR PATENT APPLICATION

Patent No. _____
Serial No. _____

As a person named hereon, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I declare I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor, if several names are stated below of the subject matter which is claimed and for which a patent is sought on the invention entitled _____ the specification of which

(check one) ☐ is attached hereto.
☒ was filed on March 12, 1993
as Application Serial No. _____
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed

(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

_____ (Application Number)	_____ (Filing Date)	_____ (Status - patented, pending, abandoned)
_____ (Application Number)	_____ (Filing Date)	_____ (Status - patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Address all telephone calls to _____ at telephone number _____
Address all correspondence to _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name) SAMUEL BOGOCH
Inventor's signature Samuel Bogoch Date April 14, 1993
Residence Bermuda and U.K. Citizenship CANADIAN
Post Office Address 46 East 91st Street
New York N.Y. 10028
Full name of second joint inventor, if any (given name, family name) _____
Second inventor's signature _____ Date _____
Residence _____ Citizenship _____
Post Office Address _____

#3

Patent No.: _____ Docket No.: _____

Patent Issued: _____



RECOGNIN VACCINES

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) and 1.27(c)) - SMALL BUSINESS CONCERN

I hereby declare that I am ☒ the owner of the small business concern identified below:

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN Brain Research, Inc.
ADDRESS OF CONCERN 46 E. 91st St.
New York, New York 10028

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled RECOGNIN VACCINES by inventor(s) S. Bogoch

described in

- ☒ the specification filed herewith
application serial no. _____, filed _____
☐ patent no. _____, issued _____

the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). *NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME Brain Research, n.v.
ADDRESS A.S.K. 40 CEDAR AVE. HAMILTON, Bermuda
☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME _____
ADDRESS _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

the power to control both.

hereby declare that rights in my contract or law have been conveyed to and remain with the
all business concern identified above with regard to the invention, entitled

RECOGNITION VACCINES

S. Bogoch

by inventor(s)

scribed in

☒ the specification filed herewith

☐ application serial no. _____

filed _____

☐ patent no. _____, issued _____

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alify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37
R 1.9(e). *NOTE: Separate verified statements are required from each named person,
noern or organization having rights to the invention averring to their status as small
tities. (37 CFR 1.27)

NAME _____ Brain Research, Inc.

ADDRESS _____ 46 E. 91st St., New York, New York 10028

☐ INDIVIDUAL

☒ SMALL BUSINESS CONCERN

☐ NONPROFIT ORGANIZATION

NAME _____

ADDRESS _____

☐ INDIVIDUAL

☐ SMALL BUSINESS CONCERN

☐ NONPROFIT ORGANIZATION

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I hereby declare that all statements made herein of my own knowledge are true and that all
statements made on information and belief are believed to be true; and further that these
statements were made with the knowledge that willful false statements and the like so made
are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the Unite
States Code, and that such willful false statements may jeopardize the validity of the
application, any patent issuing thereon, or any patent to which this verified statement is
directed.

NAME OF PERSON SIGNING _____

Samuel Bogoch

TITLE OF PERSON OTHER THAN OWNER _____

President - Brain Research, n.v.

ADDRESS OF PERSON SIGNING _____

A.S.K. 40 CEDAR AVE.

HAMILTON, Bermuda

SIGNATURE _____

DATE March 12, 1993

Samuel Bogoch Samuel Bogoch
Samuel Bogoch

Filed or Issued:

For:



VERIFIED STATEMENT (DECLARATION) REGARDING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(b)) - INDEPENDENT INVENTOR

As a ~~small~~ named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled _____ described in _____

☒ the specification filed herewith
☐ application serial no. _____, filed _____
☐ patent no. _____, issued _____

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☐ no such person, concern, or organization
☒ persons, concerns or organizations listed below

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

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ADDRESS 46 E. 91st St., New York, New York 10028
☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME Brain Research n.v.
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

...er of employees of the concern, including those of its affiliates, does not exceed
...ons. For purposes of this statement, (1) the number of employees of the business
... is the average over the previous fiscal year of the concern of the persons employed
... full-time, part-time or temporary basis during each of the pay periods of the fiscal
... year, and (2) concerns are affiliates of each other when either, directly or indirectly, one
... concern controls or has the power to control the other, or a third party or parties controls
... or has the power to control both.

hereby declare that rights under contract or law have been conveyed to and remain with the
all business concern identified above with regard to the invention, entitled
RECOGNITION VACCINES FOR THE PREVENTION OF AIDS by inventor(s)

S. Bogoch
scribed in

☒ the specification filed herewith
application serial no. _____, filed _____
☐ patent no. _____, issued _____

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individual, concern or organization having rights to the invention is listed below and no
rights to the invention are held by any person, other than the inventor, who could not
qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not
qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37
CFR 1.9(e). *NOTE: Separate verified statements are required from each named person,
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statements made on information and belief are believed to be true; and further that these
statements were made with the knowledge that willful false statements and the like so made
States Code, and that such willful false statements may jeopardize the validity of the
application, any patent issuing thereon, or any patent to which this verified statement is
directed.

NAME OF PERSON SIGNING Elenore Bogoch
TITLE OF PERSON OTHER THAN OWNER President, Brain Research, Inc.
ADDRESS OF PERSON SIGNING 46 E. 91st St., New York, New York 10028

SIGNATURE Elenore S. Bogoch DATE March 12, 1993
Elenore S. Bogoch March 7, 1993

Filed or Issued:

For:



RECEIVED VACCINES

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) and 1.27(b)) - INDEPENDENT INVENTOR

As named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled _____ described in _____

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I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

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Samuel Bogoch

NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR

Signature of Inventor

Signature of Inventor

Signature of Inventor

Date

Date

Date

March 12, 1993